| SCC eFile  | 2012 ANNUAL REF<br>COMMONWEALTH OF V<br>STATE CORPORATION CO                                   | 212524720<br>ON |              |                            |  |  |  |  |
|--|--|-----------------|--------------|----------------------------|--|--|--|--|
| 1.) CORPORATION NAME:  |  |                 | DUE DATE: 6  | 5/30/2012                  |  |  |  |  |
| Destination Long Point, Inc. 2.) VA REGISTERED AGENT NAM   |  |                 |              | SCC ID NO: <b>F1792243</b> |  |  |  |  |
| CORPORATION SERVICE COI<br>Bank of America Center, 16th<br>1111 East Main Street   |  |                 | 5.) STOCK IN | IFORMATION AUTHORIZED      |  |  |  |  |
| RICHMOND, VA 23219   |  |                 | COMMON       | 1,000                      |  |  |  |  |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY  |  |                 |              |                            |  |  |  |  |
| 4.) STATE OR COUNTRY OF INCO   | DRPORATION:  |                 |              |                            |  |  |  |  |
| 6.) PRINCIPAL OFFICE ADDRESS:  |  |                 |              |                            |  |  |  |  |
| ADDRESS: 11777 S<br>STE 90   |  |                 |              |                            |  |  |  |  |
| CITY/ST/ZIP: LOS ANGELES, CA 90049   |  |                 |              |                            |  |  |  |  |
| 7.) DIRECTORS AND PRINCIPAL OFFICERS:  All directors and principal officers must be listed. An individual may be designated as both a director and an officer. |  |                 |              |                            |  |  |  |  |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:   | KATHLEEN R MCINTEE<br>PRESIDENT<br>10333 E DRY CREEK ROAD<br>#450<br>ENGLEWOOD, CO 80112       | X OFFIC         | DER          | X DIRECTOR                 |  |  |  |  |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:   | CHARLES S PECK PRESIDENT 10333 E. DRY CREEK RD #450 ENGLEWOOD, CO 80112                        | X OFFIC         | CER          | X DIRECTOR                 |  |  |  |  |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:   | JOHN M DEMARCO<br>SR VP CORP CSL<br>11777 SAN VICENTE BLVD<br>STE 900<br>LOS ANGELES, CA 90049 | X OFFIC         | CER          | DIRECTOR                   |  |  |  |  |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:   | TERRI HAACK<br>VICE PRESIDENT<br>11777 SAN VICENTE BLVD<br>STE 900<br>LOS ANGELES, CA 90049    | X OFFIC         | CER          | DIRECTOR                   |  |  |  |  |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO:   | MARK HAYS VICE PRESIDENT 10333 E DRY CREEK RD STE 450 ENGLEWOOD, CO 80212                      | X OFFIC         | CER          | DIRECTOR                   |  |  |  |  |

|  |                           |  | Х       | OFFICER                 | DIRECTOR                 |  |  |
|--|---------------------------|--|---------|-------------------------|--------------------------|--|--|
|  | NAME:                     | PETER R. O'KEEFFE                        |         |                         |                          |  |  |
|  | TITLE:                    | SR VP                                    |         |                         |                          |  |  |
|  | ADDRESS:                  | 11777 SAN VICENTE BLVD                   |         |                         |                          |  |  |
|  |                           | STE 900                                  |         |                         |                          |  |  |
|  | CITY/ST/ZIP/CO:           | LOS ANGELES, CA 90049                    |         |                         |                          |  |  |
|  |                           | 2007111022220, 071 00040                 |         |                         |                          |  |  |
|  |                           |  | X       | OFFICER                 | DIRECTOR                 |  |  |
|  | NAME:                     | SALVE A. PENNYA                          |         |                         |                          |  |  |
|  | TITLE:                    | SR VP ASST SEC                           |         |                         |                          |  |  |
|  | ADDRESS:                  | 11777 SAN VICENTE BLVD                   |         |                         |                          |  |  |
|  |                           | STE 900                                  |         |                         |                          |  |  |
|  | CITY/ST/ZIP/CO:           | LOS ANGELES, CA 90049                    |         |                         |                          |  |  |
|  |                           |  | Х       | OFFICER                 | DIRECTOR                 |  |  |
|  | NAME:                     | RONALD SANDVIG                           |         |                         |                          |  |  |
|  | TITLE:                    |  |         |                         |                          |  |  |
|  | ADDRESS:                  | VICE PRESIDENT<br>11777 SAN VICENTE BLVD |         |                         |                          |  |  |
|  | ADDRESS.                  |  |         |                         |                          |  |  |
|  | CITY/ST/ZIP/CO:           | STE 900<br>LOS ANGELES, CA 90049         |         |                         |                          |  |  |
|  | 011 170 17211 700.        | LOS ANGELES, CA 90049                    |         |                         |                          |  |  |
|  |                           |  | X       | OFFICER                 | DIRECTOR                 |  |  |
|  | NAME:                     | KAREN I SCHLESIER                        |         |                         |                          |  |  |
|  | TITLE:                    | VICE PRESIDENT                           |         |                         |                          |  |  |
|  | ADDRESS:                  | 11777 SAN VICENTE BLVD                   |         |                         |                          |  |  |
|  |                           | STE 900                                  |         |                         |                          |  |  |
|  | CITY/ST/ZIP/CO:           | LOS ANGELES, CA 90049                    |         |                         |                          |  |  |
|  |                           |  | Х       | OFFICER                 | DIRECTOR                 |  |  |
|  | NAME:                     | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\   |         | OFFICER                 | BIREGIOR                 |  |  |
|  | TITLE:                    | WILLIAM T WETHE                          |         |                         |                          |  |  |
|  |                           | CFO SR VP                                |         |                         |                          |  |  |
|  | ADDRESS:                  | 11777 SAN VICENTE BLVD #900              | )       |                         |                          |  |  |
|  | CITY/ST/ZIP/CO:           | LOSANGELES, CA 90049                     |         |                         |                          |  |  |
|  |                           |  | Х       | OFFICER                 | DIRECTOR                 |  |  |
|  | NAME:                     | DONA TANAKA                              |         |                         |                          |  |  |
|  | TITLE:                    | SECRETARY                                |         |                         |                          |  |  |
|  | ADDRESS:                  | 11777 SAN VICENTE BLVD #900              | ١       |                         |                          |  |  |
|  | CITY/ST/ZIP/CO:           | LOS ANGELES, CA 90049                    | ,       |                         |                          |  |  |
|  |                           | EOS ANGELES, CA 90049                    |         |                         |                          |  |  |
|  |                           |  |         | OFFICER                 | χ DIRECTOR               |  |  |
|  | NAME:                     | AVEDICK B POLADIAN                       |         |                         |                          |  |  |
|  | TITLE:                    | DIRECTOR                                 |         |                         |                          |  |  |
|  | ADDRESS:                  | 11777 SAN VICENTE BLVD #900              | )       |                         |                          |  |  |
|  | CITY/ST/ZIP/CO:           | LOS ANGELES, CA 90049                    |         |                         |                          |  |  |
| I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND    |                           |  |         |                         |                          |  |  |
| COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.  |                           |  |         |                         |                          |  |  |
|  |                           |  |         |                         |                          |  |  |
| /s/ DONA TA  |                           | DONA TANAKA, SECRETAI                    |         |                         | 29/2012                  |  |  |
|  | OF DIRECTOR/OFFICER       |  | ORAT    | E                       | DATE                     |  |  |
| LISTE  | O IN THIS REPORT          | TITLE                                    |         |                         |                          |  |  |
| It is a Class 1 n  | nisdemeanor for any perso | on to sign a document, which include     | es this | electronic record, that | is false in any material |  |  |
| respect with the intent that the document be delivered to the Commission for filing. |                           |  |         |                         |                          |  |  |